Clinical Performance Improvement Site Self Evaluation

Fa	cility Name:					
Evaluation completed by:			Date completed:			
1.	1. Clinical Performance Improvement (CPI) Team (NOTE: your facility may call this GPRA, Quality Assurance (QA), Quality Initiative (QI) or other similar terms)					
	Has a CPI Team been identified	☐ Yes ☐ No				
	Has a Team leader been appointed?		☐ Yes ☐ No		No	
If you have a CPI Team, do they meet on a scheduled basis?			☐ Yes ☐ No			
	Does your Team include a member from the following?:					
	Facility Director:	☐ Yes ☐ No	Medical Staff	f Director:	☐ Yes ☐ No	
	Nursing Supervisor:	☐ Yes ☐ No	Dental Direct	tor:	☐ Yes ☐ No	
	QA/QI Coordinator:	☐ Yes ☐ No	Immunization	n Coordinate	or: Yes No	
	Health Records Supervisor	r: Yes No	Computer Sit	e Manager:	☐ Yes ☐ No	
	Lead Data Entry Operator	: Yes No				
2.	Are the following RPMS applications currently in use?					
	Immunization	☐ Yes ☐ No	Women's He	alth	☐ Yes ☐ No	
	Lab	☐ Yes ☐ No	Health Summ	nary	Yes No	
3.	Are there procedures in place to determine if the patient is due for a pap, mammogram, cholesterol, or immunizations when they come to your facility?					
	Pre appointment chart reviews			☐ Yes ☐ No		
	Triage review (Visit Planning)		☐ Yes ☐ No			
PCC health summaries (or some other form) are used to list the health maintenance needs of the patients				Yes [] No	
	Other (specify):			☐ Yes ☐	No	





4.	Are documentation and filing procedures for the medical record standardized in your facility?				
	Cholesterol labs are filed in an identifiable lab section of your record	☐ Yes ☐ No			
	Mammograms are filed in an identifiable section of your record	☐ Yes ☐ No			
	All immunizations are documented in a standard location on the PCC form so that the PCC data entry staff can identify the procedure	☐ Yes ☐ No			
	Documentation procedures are in place when a patient refuses a recommended exam, test, or procedure	☐ Yes ☐ No			
5.	How does data flow through your facility?				
	Procedures have been established that outline how cholesterol tests and pap smear results get to the PCC data entry staff	☐ Yes ☐ No			
	Procedures have been established that outline how the facility obtains pap smear, mammogram, and/or immunization information when these procedures have been performed by an outside provider.	☐ Yes ☐ No			
	Pap Smear, mammogram, and/or immunization information received from outside providers is routed to PCC data entry staff	☐ Yes ☐ No			
	All procedures performed in your facility are routinely documented on the PCC form, in a standard location that has been agreed to by the provider staff and PCC data entry staff	☐ Yes ☐ No			
6.	Other				
	PCC data entry function is adequately staffed	☐ Yes ☐ No			
	PCC data entry is current	☐ Yes ☐ No			
	Preventive health services are marketed to your patients (i.e. health fairs, senior citizen luncheons, etc.	☐ Yes ☐ No			



